

CALIFORNIA CHILDREN & FAMILIES COMMISSION

Thursday, May 18, 2000
Los Angeles County – Elizabeth Learning Center
4811 Elizabeth Street
City of Cudahy, CA

I. Call to Order.

The meeting was called to order by Chairman Rob Reiner at 9:45 a.m.

II. Roll Call.

Present were Commissioners Kim Belshe, Sandra Gutierrez, Susan Lacey, Patricia Siegel, Louis Vismara, Ed Melia, Margaret Fortune and Chairman Reiner.

Staff Present: Jane I. Henderson, Ph.D., Executive Director; Emily Nahat, Deputy Director for Program Management; Patti Huston, Chief of Governmental Affairs; Carla Hass, Consultant, MaryAnne Reihl-Campos, Associate Program Analyst, Program Management Office; Luis Sepulveda, Associate Program Analyst, Program Management Office; Sherrill Willis, Assistant Information Systems Analyst; Lupe Almer, Staff Services Analyst; and Maria Campos-Vergara, Executive Secretary.

III. Approval of Minutes, April 20, 2000 State Commission Meeting.

MOTION: Commissioner Siegel moved, seconded by Commissioner Lacey to approve the April 20, 2000 minutes with the corrections as noted. The motion passed unanimously.

IV. Elizabeth Street Learning Center – Emilio Vasquez, Principal, Introduction and 10 Minute Video Presentation.

Emilio Vasquez briefly described the programs and philosophy of the Elizabeth Learning Center. The school teaches pre-K to twelfth grade. The school has partnerships with other agencies to provide the *Urban Learning Center* and a community oriented school. The campus has a partnership with Saint Francis Hospital, which provides a full clinic and a full time nurse practitioner. The *Parents Center* provides the Center with 1000 hours of parent volunteers. There are about 30 parents on campus helping with supervision on a regular basis. The Learning Center has a partnership with Adult School, which provides education for the student's parents. Mr. Vasquez described the Learning Center's *Learning Supports* philosophy, which involves the student's entire family. He also described the Head Start, college and career counseling programs. The high school has technical and medical career path programs and provides internships for participating students.

Tours of Elizabeth Learning Center were conducted.

V. Panel Presentation on Family Resource Center Models

Neal Halfon, M.D., Director, UCLA Center for Healthier Children, gave a presentation, which focused on community-based comprehensive models of family support. These models coordinate, integrate and provide a full continuum of services in a systematic way for families with young children. The Elizabeth Learning Center model continues to evolve and develop. Dr. Halfon discussed how programs would be evaluated in the long-term and how well Elizabeth Street students perform in comparison to other schools. The concept of social-emotional achievements and its importance as compared to the Stanford-9 tests was discussed. The 1) *school link* learning support, 2) *school based/community run* learning support and 3) *integrated* learning support are three models of early learning support. Dr. Halfon described how each of these model types is funded. The integrated learning support model used at Elizabeth Street attempts to shift funding away from high need, fewer numbers of children with mental health, juvenile justice, and child welfare problems as well as prevent more of the children from moving up this pyramid into high need. Birthing centers and schools are two of the important peer systems that need to be built up in order to connect a bridge from birth to school.

Mary View-Schneider, representing the UCLA Program for Integrated School & Community Solutions, described the design of the Elizabeth Street Learning Center, which is composed of curriculum and instruction, governance and maintenance, enabling and learning supports. These design components were part of the Urban Learning Center's beginning. The center started nine years ago and initially the pre-K program and child care in the community was necessary in order for parents to access adult education programs. Ms. Valentine described the Learning Center's Case Review Panel model, which meets six times a year. State Legislature representatives and all of the community partners are brought in, creating a lot of leverage.

Carol Valentine, representing The Elizabeth Learning Center, gave a presentation detailing the Learning Center's programs and how each is funded through a mix of Federal, State and volunteer efforts. Some positions were initially provided for through grants and were later made part of the school's budget in order to make it sustainable.

Lynn Yonekura, M.D., Medical Director of Perinatal Services and Executive Director of Family Support Programs for the California Hospital Medical Center, gave a presentation on the community-based, family resource center and home visitation model based at California Hospital called Hope Street Family Center. The Hope Street Family Center primarily focuses on prevention and then secondarily, on acute care. The center provides early childhood development beginning with a healthy birth and continuing with early childhood education and parenting education to promote children entering school ready to learn. Dr. Yonekura described the demographics and health statistics of the people served by the hospital. The combination of both home and center-based services decreases the social isolation that many families suffer from. She also described the *Even Start*, a family literacy program, which integrates early childhood development, adult literacy and basic education, intergenerational learning and parenting education into a unified program. The Hope Street Youth Center is an academic enrichment and

recreational after-school program for school-aged youths ages eight to eighteen. The Youth Center's Learning center enables students to participate in helping one student to succeed post-program, an innovative literacy program that matches mentors from the community with students who need assistance with reading and language arts. Co-located in the hospital is a continuation high school classroom for over twenty former high school dropouts and students who have experienced difficulties in other learning settings. The Youth Center has child care programs, which meet the rigorous Head Start standards. The licensed child care facility at the pediatric family medical center and an extended day child care consortium use the same creative curriculum to facilitate the movement of children from daycare into the family day care environment. Dr. Yonekura described the programs available to licensed child care homes in the community involved with the center. The outcomes of preliminary research reports were discussed.

Cecilia Samartin, M.A., a licensed marriage and family therapist, gave a presentation on the successes of the Home Visiting programs. The duties and qualifications of home visitors, which focus on strengthening the child parent relationship and broader family support services, were described. The Home Visiting program has a multi-disciplinary support team comprised of professionals in specific fields that address the comprehensive nature of the service.

Deanna Gomby, author of a report on Home Visitation published by the Packard Foundation, gave a presentation that described the results of recent evaluations of national models of home visiting programs. Generally these stand-alone home visitation programs began with the goal of helping parents to develop good parenting skills, promoting children's health and development, and helping parents to get off welfare and go back to work or school. Ms. Gomby explained the program's problems associated with implementation, family retention, home visitor retention, and having home visitors deliver the curriculum correctly. Ms. Gomby suggested that the most important thing home visiting programs can do is to focus on quality and implementation issues and to use research to determine the results of a program. Ms. Gomby presented the following questions for groups to answer prior to forming a home visiting support program:

- 1) What are the goals to be accomplished?
- 2) Is home visiting the best strategy to reach those goals?
- 3) Does the curriculum match the goals?
- 4) What level of benefit is considered a success?
- 5) Are the programs rigorous enough to meet the standard of success?
- 6) What is the target population?
- 7) Has the model been successful with the target population?
- 8) Does the community have the necessary supportive services for the program?

Eileen Carroll, manager, State Department of Social Services, described a five-year clinical controlled study of the Healthy Families Program. The Healthy families design was enhanced by creating a team approach that used a child development specialist with center-based services. Ms. Carroll reported statistically significant reductions in clinical depression in mother and psychological aggression. An increase in the first and second year of cognizant development

scores has been noted. The team approach has also shown a higher retention rate. Ms. Carroll described the Cal Save and the Answers Benefiting Children programs and how these programs are funded.

Alex Morales, Executive Director of the Children's Bureau of Southern California gave a presentation, which described their program. He explained that the home visitation programs, coupled with family resource centers engage families and that there are too few institutions available for families with children ages zero to five years. He stressed the importance of non-stigmatizing language for programs to help families participate without being labeled. The existing system of family resource centers is presently not well equipped to move in the direction of zero to five. These programs need to make organizational commitments and the training to make these changes possible.

Connie Busse, Executive Director of Family Support California, gave a presentation, which discussed the complexities of sustaining family resource center models. Ms. Busse described the development of the book called *Family Resource Centers, Vehicles for change*. She discussed several key components of family resource centers, which included comprehensive sets of services, supports consisting of informal groups designed to prevent social isolation, and partnering with the community. The development of leadership training is necessary to promote the longevity of family resource center programs.

Commissioner Belshe asked panel members how a home visitor might demonstrate their value to the families, so that they see the benefit of participating over a period of time.

Carol Valentine responded by suggesting that the layer of services, parents retaining autonomy and control over programs, and by providing non-threatening, social classes that encourage family participation, are instrumental in creating value for a family.

Cecilia Samartin suggested that another important factor is the offering of services that support a family's individual needs.

Sandra Gutierrez commented that smaller grass roots organizations also have the potential of becoming successful family resource centers. She asked what models exist where child care centers are a central place in a family resource center.

Commissioner Vismara asked Ms. Gomby if there are home visitation models in which the community and the families are involved at the ground level in terms of designing home visitations.

Deanna Gomby responded that there is not a model, in terms of the program sites that are studied, which includes input from its target population in its development and planning. It may occur though, in programs across the country. At Elizabeth Street parents have conducted community needs assessments and have sat on the school's policy setting Governing Board.

Carol Valentine reported that one of the requirements of the early Head Start program is that there is a policy counsel comprised of parents in the program. These parents are involved very intricately in the planning and personnel hiring and firing.

Alex Morales stated that it is the relationship between home-based service and the family resource center, which amplifies goals. He added that the next part of the equation would be a strong child development program and WIC.

Connie Busse commented that in programs where a child care center is not possible, the link between home-based child care and the family resource center becomes critical.

Commissioner Siegel commented that as the State Commission, in partnership with communities, must consider the barriers of individual programs as well as the issues of training, compensation, and retention.

VI. Discussion on the State Commission's Objectives and Priorities for Program Funding

Executive Director Henderson presented a report on the State Commission's objectives and priorities for program funding. Upcoming public forums and hearings were discussed as well as recommendations made by the newly formed Executive Directors' Committee with regard to the draft document. The report summarized recommendations on the State Commission's objectives and priorities taken from teleconferences held with county commissions and executive directors. Dr. Henderson discussed the following recommendations to the Commission:

- 1) A clearer delineation of the State Commission's role as opposed to the county commissions.
- 2) The State Commission needs to play a stronger role in supporting county commissions in dealing with issues that have a statewide impact, particularly media advocacy, infrastructure development, research and evaluation, utilizing State funds to influence and affect systems change at the state and federal levels.
- 3) School readiness should be included in the Guiding Principles.
- 4) Efforts in child care should be directed at all providers, not just licensed care givers.

Executive Director Henderson discussed approaches to develop a systems approach to improve child development and school readiness at the state and county levels and how commissions at the state and local levels would support such systems. The State Commission's focus is on building capacity and supporting infrastructure development including interdisciplinary training, technical assistance, development of standards, curriculum, curriculum materials, funding infrastructure development through facilities, compensation issues, interagency collaboration, research and evaluation, supporting information technology and developing an information system. Also discussed were the State Commission's role in Public Education, media outreach and campaigns, and policy development and advocacy.

Ms. Henderson described several methods of supporting and improving the delivery system which included funding demonstration, pilot programs and evaluation, providing matching and incentive grants to county commissions, jump-starting promising practices, and models of collaboration or systems change. Also discussed were areas of funding within systems collaboration which impact child outcome and school readiness.

Pat Weaver suggested that the State Commission partner with the county programs and local cable television and present the materials to the public in a format that could be put on television. Dorinda Ohnstad, Executive Director, King's County, suggested that the when money is allocated by the Commission that there be conditions on the use of those funds to promote systems change.

VII.

VII Closed Session: Discussion and Status Report from Legal Counsel Regarding Pending Litigation:

California Association of Retail Tobacconists, Inc. et al., v. State of California Children and Families First Commission and Kathleen Connell, as Controller of the State of California, San Diego County Superior Court Case No. 732079; Government Sections 11126(e)(1) and 11126(e)(2)(A).

Cigarettes Cheaper! And The Customer Company v. Board of Equalization of the State of California, Kathleen Connell, as Controller of the State of California, and the California Children and Families First Commission, Sacramento County Superior Court Case No. 99AS03606; Government Sections 11126(e)(1) and 11126(e)(2)(A).

McLane/Suneast v. The Board of Equalization of the State of California, Los Angeles Superior Court Case No. BC220052; Government Sections 11126(e)(1) and 11126(e)(2)(A).

A closed session was held.

VIII. 2000-01 Legislation and Budget Update – Governor’s May Revision to the State Budget; Criteria for State Commission Involvement in Legislative and Budget Issues

Patti Huston, Chief of Governmental Affairs, gave a report, which discussed the criteria for determining what will engage the Commission and its involvement in Legislative and Budget issues. The report detailed information on the implementation provisions of changes and initiatives that are contained in the May revision in both policy bills and budget trailer bills. The report also proposed an approach to reviewing Legislation in order to determine the Commission's level of involvement. Ms. Huston described the three levels of review, which were outlined in a handout. Staff would present only those measures that meet all levels of criteria for

direction or approval. The Commission would then direct staff to engage in any measures that it approves. Engagement would mean communicating with the bill's author, testifying before the committee that the bill is up for hearing or undertaking other specific lobbying efforts. Three lists of bills, which would include a **watch**, **direct impact**, and **proposed action bills**, will be prepared by staff for each Commission meeting. Staff recommended that staff acts and lobbies actively only those items on which the State Commission has taken a formal position.

Also discussed were timelines for State agencies and both houses with regard to the May revision. The Governor gave the State and Consumer Services Agency the responsibility for the Child Care Policy Review. This research was hindered by a lack of data resulting in funding of the Department of Education for data collection, current year staffing, and for consultant services to complete the report. Ms. Huston discussed the Federal Child Care Quality Expenditure Plan that requires the State Department of Education to coordinate with the State Department of Social Services and with the Prop 10 State Commission to identify annual statewide expenditures for quality enhancements, which qualify for meeting Federal requirements. The Department of Education's Expenditure Plan is due to the Department of Finance on September 1, 2000. The May revision proposes to expand health coverage to Californians, using \$178,000,000 in tobacco settlement money. The Governor's Budget for January 2000 included an increase of more than \$25,000,000 for the anti-smoking/tobacco media campaign. The May revision includes an additional \$10,000,000 for the DHS anti-smoking/tobacco media campaign. The State Commission has budgeted \$40,000,000 for its anti-tobacco campaign. Ms. Huston went through the May Revision packet and described its contents.

Commissioner Vismara requested that staff review the bills that have been introduced this year and determine what percentage would fall into the three bill lists for Commission action.

Commissioner Siegel suggested that the opportunity to be proactive was missing from the criteria as well as language addressing a failed budget proposal. The words "systemic reform" or "systemic improvement" should be added to the criteria. Commissioner Siegel also pointed out that in the K-12 budget the Governor proposed a recoup of lost COLAs*, which do not extend to any of the categorical programs. Secondly, there are no new expenditures for child development programs. She discussed funding issues for child care and child development programs, as well as suggestions for eligibility criteria for CalWorks families, which would limit parental choice with regard to child care.

Jody Brandenburger, San Bernardino County, spoke to the issues of budget subcommittees and reform without funding. She suggested that the Commission allow the staff to work with the local commissions and that reforms could be very helpful.

Betsy Hiteshew, California Association for the Education of Young Children, asked why the Commission doesn't consider Federal Legislation and questioned whether engaging in advocacy is an appropriate role for the Prop 10 Commission.

MOTION: Commissioner Belshé moved, seconded by Commissioner Lacey, to adopt staff recommendation regarding criteria for State Commission involvement in Legislative and Budget issues.

The motion carried unanimously.

IX. Chairman's Report

Chairman Reiner reported that the following counties have submitted Strategic Plans to the Commission: Alameda, Kern, Kings, Los Angeles, Merced, Napa, Nevada, Orange, Riverside, San Bernardino, San Mateo, Santa Barbara, San Diego, Tulare, Sonoma, Monterey, and Ventura. As of May 1, 2000, the Commission's Mass Media Account has \$41,136,797, the Education account has \$34,365,557, the Child Care account has \$25,568,478, the Resource Development account has \$25,518,451, and the Unallocated account has \$16,447,793. Chairman Reiner discussed the Safe from the Start conference and noted that there will be six regional conferences around the State. A formal Advisory Committee on Diversity was approved at the March Commission meeting and nominations have been made. Commissioners Gutierrez and Fortune are in the process of screening existing nominations and soliciting additional nominations for under-represented areas.

X. Executive Director's Report.

Jane Henderson, Executive Director, reported that the statewide conference with county commissions is scheduled for July 27-28, 2000 at UC Davis. Experts in child care and collaboration will be keynote speakers and appointment times will be available through the Technical Assistance Center consultants with county commissions. Plans are being made for an early December two-day statewide conference in San Diego.

Commissioner Gutierrez requested that an update on the programs funded in March be included in the next Commission Agenda.

XI. Communication Director's Report.

There was no report on this item.

XII. Report from the County Executives Committee

Dorinda Ohnstad, Executive Director for King's County Children and Families Commission and interim spokesperson on behalf of the Executive Directors' Committee, reported that the executive directors are organizing their efforts of moving forward quickly and smoothly. The committee's first coordinated effort was to provide a collective voice for input in the State Commission's draft objectives and priorities, recognizing their importance on the future work of the State Commission as well as the work of the county commissions. The committee wants to

commend the Commission for its efforts in putting together this draft document. The county commissions are very well aware of the vital importance of the strategic plan process, but also recognize that it is a very difficult task. The collective input was provided to Jane Henderson and she has willingly cleared up her calendar and gave the committee a half day last week, which was really appreciated. It enabled the committee to discuss the draft document, provide some valuable feedback, as well as really discuss and set up a framework for an ongoing active relationship with the State Commission staff. It was exciting to see that the input was truly worked into the framework that was presented today by Dr Henderson and Ms. Ohnstad encouraged the Commission to adopt this recommended model and work into this framework the key missing elements provided through the public forum process. The committee is looking forward to continuing to work with Dr. Henderson on this model and framework, and to include the public input model so that there truly will be a wonderful working document. The committee is looking forward to playing a continued, active partnership role with the State Commission while moving forward in pursuit of the common mission to improve the overall health and well-being of California's youngest children.

Chairman Reiner thought it critical and important to have this link back to the local commissions and to hear the kind of thinking going on, particularly at a time when the Commission is looking at projects to fund.

Ms. Ohnstad explained that the committee is looking at draft bylaws, putting together a formal structure, and talking about communication within itself and with the State Commission as well as coming up with a collective voice. New members are joining as the commissions are putting their staff in place.

A member of the audience spoke to child care health linkages, a project she was working on and reported that she still has not received a final contract, yet was receiving non-stop phone calls from the counties and recipients of the program activities needing staff that is responding. She asked for the Commission's assistance in leveraging the grant agreement to at least get an advance in order for programs to be set up and move ahead in a way that captures the public's will and involvement in the development of these projects.

XIII. Adjournment.

Upon motion by Chairman Reiner, seconded by Commissioner Siegel the meeting was adjourned at 3:35 p.m.